

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009		Docket Number (Optional) ETH5115
Application Number 10/743,667		Filed 2003-12-22
For SUTURE ANCHORING DEVICE		
Art Unit 3731		Examiner RYCKMAN, Melissa K.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows
(check time period desired):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ <u>130.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$ _____

- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☐ A check to cover the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2478.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

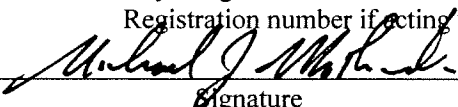
I am the ☐ applicant/inventor

- ☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

- ☒ attorney or agent of record.

- ☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34.


Signature

November 17, 2008
Date

MICHAEL J. MLOTKOWSKI, Reg. No. 33020
Typed or printed name

(703) 584-3275
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.